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Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
<u>Nobuaki</u>				<u>Nakagawa</u>			
Inventor's Signature	<u>Nobuaki Nakagawa</u>					Date	<u>4/27.2001</u>
Residence: City	Shimotsuga-gun, Tochigi	State	<u>JPX</u>	Country	Japan	Citizenship	Japan
Post Office Address	Heights Sakae E201, 31-1, Kawanago, Kokubunji-machi						
Post Office Address							
City	Shimotsuga-gun, Tochigi	State		ZIP	329-0415	Country	Japan
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	FJIN-107
	First Named Inventor	GOTO
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PREVENTIVE AND/OR THERAPEUTIC FOR OBESITY

the specification of which
☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
263004/1998	Japan	09/17/1998	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/JP99/05080	09/17/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number →

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Barry I. Hollander	28,566	Andrew E. C. Merriam	47,268

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

023290

OR ☒ Correspondence address below

Name	Barry I. Hollander				
Address	Hollander Law Firm, P.L.C.				
Address	Suite 305, 10300 Eaton Place				
City	Fairfax	State	VA	ZIP	22030
Country	United States	Telephone	703-383-4800	Fax	703-383-4804

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Masaaki				Goto			
Inventor's Signature						Date	
Residence: City	Shimotsuga-gun, Tochigi	State		Country	Japan	Citizenship	Japan
Post Office Address	456-1, Shimokoyama, Ishibashi-machi						
Post Office Address							
City	Shimotsuga-gun, Tochigi	State		ZIP	329-0511	Country	Japan

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<u>Akihiro</u>				<u>Tomoyasu</u>			
Inventor's Signature						Date	
Residence: City	Shimotsuga-gun, Tochigi	State		Country	Japan	Citizenship	Japan
Post Office Address	SK-Mansion 3-E, 1-3-3, Omatsuyama, Ishibashi-machi						
Post Office Address							
City	Shimotsuga-gun, Tochigi	State		ZIP	329-0519	Country	Japan
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<u>Kyoji</u>				<u>Yamaguchi</u>			
Inventor's Signature						Date	
Residence: City	Omiya-shi, Saitama	State		Country	Japan	Citizenship	Japan
Post Office Address	Lionsgarden Higashiomiya 1-524, 702-12 Shimacho						
Post Office Address							
City	Omiya-shi, Saitama	State		ZIP	330-0006	Country	Japan
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<u>Masahiko</u>				<u>Kinosaki</u>			
Inventor's Signature						Date	
Residence: City	Kawachi-gun, Tochigi	State		Country	Japan	Citizenship	Japan
Post Office Address	53-8, Yuukigaoka, Kaminokawa-machi						
Post Office Address							
City	Kawachi-gun, Tochigi	State		ZIP	329-0528	Country	Japan

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Given Name (first and middle [if any])				Family Name or Surname			
Nobuaki				Nakagawa			
Inventor's Signature						Date	
Residence: City		Shimotsuga-gun, Tochigi		State		Country Japan	
Post Office Address		Heights Sakae E201, 31-1, Kawanago, Kokubunji-machi.					
Post Office Address							
City		Shimotsuga-gun, Tochigi		State		ZIP 329-0415	
				Country		Japan	
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